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PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

SDT 324 Attorney Docket No. Stephen F. Gass First Inventor MITER SAW WITH IMPROVED SAFETY SYSTEM

(Only for new nonprovision	nal applications under 37 CFR 1.53(b)) Expre	ss Mail Label No. ¹	.0032206	73008
	TION ELEMENTS			sistant Comm x Patent Appl	nissioner for Patents lication
See MPEP chapter 600 con-	cerning utility patent application conter	nts.	Wa	ashington, DC	20231
2. X Submit an original and a Applicant claims s See 37 CFR 1.27 3. Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Reg - Reference to see	[Total Pages 28] Int set forth below) In of the invention the to Related Applications arding Fed sponsored R & D Requence listing, a table,	(/ a.	CD-ROM or CD-R Computer Program ucleotide and/or Amino / f applicable, all necessar Computer Reada Specification Sequence i. CD-ROM i i. paper	(<i>Appendix</i>) Acid Sequency) ble Form (CR	ce Submission
	program listing appendix	c.	Statements verify	ina identity o	f ahove conies
 Background of Brief Summary 		- C.		 	
- Brief Description	on of the Drawings (if filed)	-	ACCOMPANYING		1
- Detailed Descri - Claim(s)	ption	9.	_ •	•	et & document(s))
- Abstract of the	Disclosure	10.	37 CFR 3.73(b) S (when there is an		Power of Attorney
4. X Drawing(s) (35 U	J.S.C. 113) [Total Sheets 09] 11.	English Translation	• .	(if applicable)
5. Oath or Declaration	[Total Pages 03] 12.	Information Disck Statement (IDS)/I		Copies of IDS Citations
a. X Newty exec	uted (original or copy)	13.	Preliminary Amer		
Copy from a	prior application (37 CFR 1.63 (d)) httion/divisional with Box 18 completed)	14.	Return Receipt P		
i. DELET	ION OF INVENTOR(S)	15.	Certified Copy of (if foreign priority	•	·
	atement attached deleting inventor(s) the prior application, see 37 CFR	1	Nonpublication R		
	and 1.33(b).	16.			ach form PTO/SB/35
		İ	or its equivalent.		•
6. Application Data	Sheet. See 37 CFR 1.76	17.	Other:		·
	CATION, check appropriate box, and	supply the re	quisite information below	and in a pre	liminary amendment,
or in an Application Data She	Divisional X Continuation-in-part (C	יום/	of prior application No.:	9 ,676.	190
Prior application information:	Examiner B. Ashley	AIT)	Group Art Unit: 372		
	IONAL APPS only: The entire disclosure	of the orior ap	Group Fat Offic.		tion is supplied under
Box 5b, is considered a part o	f the disclosure of the accompanying co- relied upon when a portion has been ina	ntinuation or c	livisional application and	s hereby inco	rporated by reference.
	19. CORRESPO	NDENCE AD	DRESS		<u> </u>
X Customer Number or Ber Co	ode Label 27630 (Insert Customer No. crAtte	ආ ලකුණු	(223) or [Chruphride	e address below
Name	Stephen F. Gass, Esc	i •		7620	
V	SD3, LLC		2	TRADEMARK OFF	ICF
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City	Wilsonville	State	Oregon	Zip Cod	de 97070
Country	US	Telephone	(503) 638-620	Fax	5036388601
Name (Print/Type)	Stlephen F. Gass	Re	gistration No. (Attorne	v/Agent)	38,462
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Signature	1 J J			Date	1/14/02

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PTO/SB/17 (11-01)
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	Complete if Known
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for FY 2002

Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Known			
Application Number			
Filing Date	January 14, 2002		
First Named Inventor	Stephen F. Gass		
Examiner Name			
Group Art Unit			
Attorney Docket No.	SDT 324		

METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)	
Check	
Deposit Account:	
Deposit Account Fee Fee Code (\$) Fee Description	Fee Paid
Number 105 130 205 65 Surcharge - late filing fee or oath	
Deposit Account Name 127 50 227 25 Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply) 139 130 Non-English specification	
Charge fee(s) indicated below Credit any overpayments 147 2,520 For filling a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filling fee 112 920° Requesting publication of SIR prior to	
to the above identified deposit execut	
FEE CALCULATION 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE 115 110 215 55 Extension for reply within first month	
Large Entity Small Entity Small Entity 216 200 Extension for reply within second month	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	
118 1,440 218 720 Extension for reply within fourth month	
106 330 206 165 Design filing fee 370.00 128 1,960 228 980 Extension for reply within fifth month	
107 510 207 255 Plant filing fee 119 320 219 160 Notice of Appeal	
108 740 208 370 Reissue filing fee 120 320 220 160 Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee 121 280 221 140 Request for oral hearing	
138 1,510 Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)370.00 140 110 240 55 Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 141 1,280 241 640 Petition to revive - unintentional	
Extra Claims below Fee Paid 142 1,280 242 640 Utility issue fee (or reissue)	
Total Claims 20 -20** = 20 x 9 = 0 143 460 243 230 Design issue fee	
Claims US -3 - US A 42 = U 144 620 244 310 Fiant issue fee	
Multiple Dependent $\boxed{140}$ = $\boxed{0}$ 122 130 Petitions to the Commissioner	
Large Entity Small Entity Small Entity 123 50 123	
Fee Fee Fee Fee Fee Pescription	
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 581 40 Recording each patent assignment per property (times number of properties)	-
102 84 202 42 Independent claims in excess of 3 146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))	
104 280 204 140 Multiple dependent claim, if not peid 109 84 209 42 **Reissue independent claims over original patent 149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20 179 740 279 370 Request for Continued Examination (RCE)	
and over original patent 169 900 Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 0.00 Other fee (specify)	
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.0	00

SUBMITTED BY	SUBMITTED BY Complete (if applicable)				applicable)
Name (Print/Type)	Stephen, F. Gass	Registration No. (Attorney/Agent)	38,462	Telephone	(503) 638-6201
Signature	JAJA			Date	1/14/02

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